

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Speech Therapy
<b>Case Number:</b> 0100025	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for speech therapy for a young child to treat a developmental delay which the family feels may be due to illness.	<b>Reason for Decision:</b> External review agency determined that speech therapy for this child is not a covered benefit since it is a developmental issue.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100029	<b>Appeal Decision:</b> Partially Overturned
<b>Case Summary:</b> Patient requesting coverage for physical therapy services beyond the authorized number of days allowed by the health plan for treatment of arm pain due to cervical and thoracic dysfunction.	<b>Reason for Decision:</b> External review agency determined that the therapy being provided is beneficial, but the patient needs to move towards independence. Therefore, is determined that 3 more visits should be authorized to set up a home therapy program, train family members to assist, and set up a cervical transaction unit in the patient's home.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100037	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for addition physical therapy visits beyond the authorized number of days allowed by the health plan.	<b>Reason for Decision:</b> External review agency determined that addition physical therapy was not medically necessary since there were no signs that she was improving even after 6 months of continuous physical therapy.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100043	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for additional physical therapy treatment that is working, according to the patient.	<b>Reason for Decision:</b> External review agency determined that the eight additional visits offered by the health plan are sufficient to allow time to teach a home/gym regimen to the patient for use on her own. Any additional physical therapy would not be in her best interest.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Speech Therapy
<b>Case Number:</b> 0100055	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Insured requesting coverage for speech therapy for an autistic child which has had this service covered since 1999.	<b>Reason for Decision:</b> External review agency determined that the patient's issue is with phonics and is therefore educational in nature and not a therapy issue.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100060	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for additional physical therapy visits.	<b>Reason for Decision:</b> External review agency determined that additional physical therapy would not benefit this patient at this time and additional physical therapy beyond the health plan's authorized number of days for service is not a covered benefit.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Speech Therapy
<b>Case Number:</b> 0100076	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Insured requesting coverage for speech therapy for a four year old child.	<b>Reason for Decision:</b> External review agency determined that there is no indication that his condition has a motor or neurological basis. It is therefore developmental and speech therapy services for developmental issues are not a covered benefit.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100117	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for addition physical therapy beyond the 60 day limit of the health plan's contract.	<b>Reason for Decision:</b> External review agency determined that further physical therapy is not medically necessary since the patient has already reached the health plan's 60 day limit and has not shown any improvement.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Speech Therapy
<b>Case Number:</b> 0100129	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Insured requesting coverage for speech therapy based on the belief that the condition is not developmental.	<b>Reason for Decision:</b> External review agency determined that since there were no MRI's done, they could not properly determine medical necessity. However, if an MRI had been done and the results were normal, the condition would be developmental and speech therapy would not be medically necessary.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Auditory Integration Therapy
<b>Case Number:</b> 0100145	<b>Appeal Decision:</b> Upheld
<b>Case Summary:</b> Patient requesting coverage for auditory processing enhancement to correct a condition possibly brought about by three surgeries to correct a hypo-plastic left heart condition.	<b>Reason for Decision:</b> External review agency determined that the patient's auditory processing difficulty is secondary to multiple open heart procedures and is therefore a developmental condition. Treatment for a developmental condition is not a covered benefit.

<b>Appeal Type:</b> Rehabilitative Services	<b>Appeal Category:</b> Physical Therapy
<b>Case Number:</b> 0100155	<b>Appeal Decision:</b> Overturned
<b>Case Summary:</b> Patient requesting coverage for physical therapy for son with an undetermined type of muscular dystrophy. The health plan suggested 3 or 4 sit down sessions with the school physical therapist to establish a home therapy plan.	<b>Reason for Decision:</b> External review agency determined that school therapy addresses the educational aspects of his motor disability but does not deal with contractures. Such treatment is medically necessary to prevent further disability and possibly avoid surgery.